

17157 U.S. PTO
121203

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Approved for use through 10/31/2002. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

17858 U.S. PTO
10/735451
121203

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No.	
	First Inventor	RANDALL FUERST
	Title	FABRICATION OF IMPROVED CONTACT
	Express Mail Label No.	EV250946389US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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1. ☐ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages **17**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **4**]
5. Oath or Declaration [Total Pages **1**]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

- | ACCOMPANYING APPLICATION PARTS | |
|---|--|
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement
<i>(when there is an assignee)</i> | <input type="checkbox"/> Power of Attorney |
| 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> | |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of IDS Citations |
| 13. <input type="checkbox"/> Preliminary Amendment | |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> | |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> | |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | |
| 17. <input type="checkbox"/> Other: | |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____ / _____
 Prior application information: Examiner: _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS						
<input type="checkbox"/> Customer Number or Bar Code Label <div style="border: 1px solid black; padding: 2px; text-align: center;">(Insert Customer No. or Attach bar code label here)</div>		or <input checked="" type="checkbox"/> Correspondence address below				
Name	CONN. ANALYTICAL CORP.					
	Att: Joseph J. Bango, Jr.					
Address	696 AMITY ROAD					
City	BETHANY	State	CT	Zip Code	06524	
Country	U.S.	Telephone	203-393-9666	Fax	393-9777	

Nam (Print/Typ)	JOSEPH J. BANGO	Registration No. (Attorn y/Ag nt)	
Signature	<i>Joseph J. Bango</i>	Date	12/12/03

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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PTO/SB/17 (11-01)
Approved for use through 10/31/2002. OMB 0651-0032
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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2002</h3> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p>		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	
		Filing Date	
		First Named Inventor	
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$) 80	
Attorney Docket No.			

<h4 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check all that apply)</h4> <p> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p> <input type="checkbox"/> Deposit Account: </p> <div style="border: 1px solid black; width: 100%; height: 40px; margin-top: 5px;"></div> <p> The Commissioner is authorized to: (check all that apply) </p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments </p> <p> <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application </p> <p> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p> <h4 style="text-align: center; margin: 10px 0;">FEE CALCULATION</h4> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <h5>1. BASIC FILING FEE</h5> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>740</td> <td>201</td> <td>370</td> <td>Utility filing fee</td> <td rowspan="5" style="text-align: center; vertical-align: middle;">375</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> </tr> <tr> <td>107</td> <td>510</td> <td>207</td> <td>255</td> <td>Plant filing fee</td> </tr> <tr> <td>108</td> <td>740</td> <td>208</td> <td>370</td> <td>Reissue filing fee</td> </tr> <tr> <td>114</td> <td>160</td> <td>214</td> <td>80</td> <td>Provisional filing fee</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: center;">(\$) 375</td> </tr> </tbody> </table> </div> <div style="width: 45%;"> <h5>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</h5> <table style="width: 100%; border-collapse: collapse; font-size: x-small;"> <tr> <td style="width: 15%;">Total Claims</td> <td style="width: 10%; text-align: center;">20**</td> <td style="width: 10%;">=</td> <td style="width: 10%; text-align: center;">X</td> <td style="width: 10%; text-align: center;">Fee from below</td> <td style="width: 10%; text-align: center;">Fee Paid</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">3**</td> <td>=</td> <td>X</td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td>=</td> <td></td> <td></td> <td></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small; margin-top: 5px;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> <td rowspan="5" style="text-align: center; vertical-align: middle;">375</td> </tr> <tr> <td>102</td> <td>84</td> <td>202</td> <td>42</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>104</td> <td>280</td> <td>204</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> </tr> <tr> <td>109</td> <td>84</td> <td>209</td> <td>42</td> <td>** Reissue independent claims over original patent</td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: center;">(\$)</td> </tr> </tbody> </table> </div> </div> <p style="font-size: x-small; margin-top: 5px;">**or number previously paid, if greater; For Reissues, see above</p>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	101	740	201	370	Utility filing fee	375	106	330	206	165	Design filing fee	107	510	207	255	Plant filing fee	108	740	208	370	Reissue filing fee	114	160	214	80	Provisional filing fee	SUBTOTAL (1)					(\$) 375	Total Claims	20**	=	X	Fee from below	Fee Paid	Independent Claims	3**	=	X			Multiple Dependent		=				Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	103	18	203	9	Claims in excess of 20	375	102	84	202	42	Independent claims in excess of 3	104	280	204	140	Multiple dependent claim, if not paid	109	84	209	42	** Reissue independent claims over original patent	110	18	210	9	** Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)					(\$)	<h4 style="text-align: center; margin: 0;">FEE CALCULATION (continued)</h4> <h5>3. 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146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))																																																																																																																																																																																																																																																																						
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))																																																																																																																																																																																																																																																																						
179	740	279	370	Request for Continued Examination (RCE)																																																																																																																																																																																																																																																																						
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type) Joseph J. Bango, Jr.	Registration No. (Attorney/Agent)	Telephone 203-393-9666	Date 12 Dec. 2003
Signature			

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Th PTO did not receive the following listed items(s) - a check for \$80.00 but was not a check for \$375.00